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Date: August 8, 2006

To Examiner: Sean McGarry
Group 1635

From: Carolyn S. Elmore
Registration No. 37,567

Fax Number: (571)273-8300

Subject: Paper: Reply to Restriction Requirement

Docket No.: 4042.3009 US1 (BIOL0003US)

Applicants: Brett P. Monia, *et al.*

Serial No.: 10/803,482

Filing Date: March 18, 2004

Number of pages including this cover sheet 5

Please confirm receipt of facsimile: Yes X No _____

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PTO/SB/17 (07-06)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 120

Complete if Known

Application Number	10/803,482
Filing Date	March 18, 2004
First Named Inventor	Brett P. Monia
Examiner Name	Sean McGarry
Art Unit	1635
Attorney Docket No.	4042.3009 US1

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 502807 Deposit Account Name: Elmore Patent Law Group, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fees Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fees Paid (\$)
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- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$)

- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
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- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for 1 Month Extension

Fees Paid (\$)

\$120

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 37,567	Telephone (978)251-3509
Name (Print/Type)	Carolyn S. Elmore		Date August 8, 2006

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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AUG 08 2006

PATENT APPLICATION
Docket No.: 4042.3009 US1 (BIOL0003US)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Brett P. Monia and Mark J. Graham

Application No.: 10/803,482

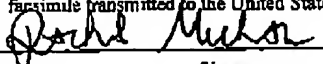
Group Art Unit: 1635

Filed: March 18, 2004

Examiner: Sean McGarry

Confirmation No.: 6288

For: Modulation of Diacylglycerol Acyltransferase 1 Expression

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REPLY TO RESTRICTION REQUIREMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The Examiner has requested that the present application be amended to make reference to the parent application and the status of the parent application.

An extension of time to respond to the Restriction Requirement is respectfully requested. A Petition for an Extension of Time for one month and the appropriate fee are being filed concurrently.

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